

Credit Card Authorization

Centron Self Storage	Inc. – Credit Card Aut	thorization for Centro	n Self Storage Inc.		
Customer Name:					
Customer Address:					
Authorization	for Automatic	Credit Card Pag	yment		
	ring charges, and any	applicable tax per the	bed above to charge the terms of the agreeme	-	
Cardholder Name:					
Card Number:					
Expiration Date:					
Cardholder Sigr	ature	Date		<u></u>	